188555

(Requestor's Name)		
(Address)		
•		
(Address)		
·		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
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SECRETARY OF STATE

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COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: Carboni's Child Life Preschool, Inc.
(Name of Corporation)
DOCUMENT NUMBER: L88555
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for fili
Please return all correspondence concerning this matter to the following:
Rachel L. Barsanti
(Name of Person)
Carboni's Child Life Preschool, Inc.
(Name of Firm/Company)
5610 54th Avenue North
(Address)
Kenneth City, Florida 33709
(City/State and Zip Code)
For further information concerning this matter, please call:
Rachel L. Barsanti at (72.7) 541-6260 (Area Code & Daytime Telephone Number
Enclosed is a check for \$35.00 made payable to the Florida Department of State.
Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



LEROY CARBONI	, hereby resign as SECRETARY
,	(Title)
of_ CARBONI'S CHILD LIFE PRESC	
(Name of	Corporation)
(Document Number, if known),	a corporation organized under the laws of the State of
FLORIDA	
N.	•
	he Hack
(Si	grature of resigning officer/director)

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314